## N18000006617

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodine Hamber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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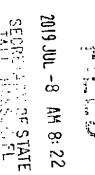
Office Use Only



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S TALLENT



Resign

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: 610B W 113 (Name of Corporation)
DOCUMENT NUMBER: N1800000 6617
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Wawan U. Hope 10 (Name of Person)
(Name of Firm/Company)
107 PEMBROYE LIPLUE (Address)
EDGATON No 37923 (City/State and Zip Code)
For further information concerning this matter, please call:
Att   Accorded to the second   Accorded to the
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301

TO: Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, William C. Hope II	, hereby resign as_	Officer / 7	Divector Title)	
of Club WIB Inc. (Name of	f Corporation)			<b>.</b>
N/800006617 (Document Number, if known)	, a corporation organized un	der the laws of th	ne State of	
Florida	·			
•				
Waliam	Conformation		<b></b>	
(Sig	gnature of resigning officer/direct	or)	2019 JUL -8	**************************************
			16-4	
FI	LING FEE 18 \$35.00		AM 8: 22 OF STATE SSELL FL	O

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314